



pg. 1

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| Issue Classification  | Application No. | Applicant(s) | |
| | 09/990,318 | FUGLEVAND ET AL. | |
| | Examiner | Art Unit | |
| | Stephen J. Kalafut | 1745 | |

| ISSUE CLASSIFICATION | | | | | | | | | | |
|--|---|----------|---|------|---|-----------------------------------|----|----|--|--|
| ORIGINAL | | | | | CROSS REFERENCE(S) | | | | | |
| CLASS | | SUBCLASS | | | CLASS | SUBCLASS (ONE SUBCLASS PER BLOCK) | | | | |
| 429 | | 22 | | | 429 | 22 | 23 | 24 | | |
| INTERNATIONAL CLASSIFICATION | | | | | | | | | | |
| H | 0 | 1 | M | 8/04 | | | | | | |
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| (Assistant Examiner) (Date) <i>Stephen J. Kalafut</i> 5/3/04 (Legal Instruments Examiner) (Date) | | | | | STEPHEN J. KALAFUT PRIMARY EXAMINER GROUP 1700 <i>SK</i> 5/4/04 (Primary Examiner) (Date) | | | | Total Claims Allowed: 76 O.G. Print Claim(s) 1 O.G. Print Fig. 2 | |

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|--|----------|------------------------------|----------|-------------------------------|----------|---------------------------------|----------|
| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant | | <input type="checkbox"/> CPA | | <input type="checkbox"/> T.D. | | <input type="checkbox"/> R.1.47 | |
| Final | Original | Final | Original | Final | Original | Final | Original |
| | 1 | | 31 | 10 | 61 | | 121 |
| | 2 | | 32 | | 62 | | 122 |
| | 3 | | 33 | | 63 | | 123 |
| | 4 | | 34 | | 64 | | 124 |
| | 5 | | 35 | 11 | 65 | | 125 |
| | 6 | | 36 | 12 | 66 | | 126 |
| | 7 | | 37 | 13 | 67 | | 127 |
| | 8 | | 38 | | 68 | | 128 |
| | 9 | | 39 | | 69 | | 129 |
| | 10 | | 40 | | 70 | | 130 |
| | 11 | | 41 | | 71 | | 131 |
| | 12 | | 42 | | 72 | | 132 |
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| | 16 | | 46 | 14 | 76 | | 136 |
| | 17 | | 47 | 15 | 77 | | 137 |
| | 18 | | 48 | 16 | 78 | | 138 |
| | 19 | | 49 | 17 | 79 | | 139 |
| | 20 | | 50 | | 80 | | 140 |
| | 21 | | 51 | | 81 | | 141 |
| | 22 | 1 | 52 | | 82 | | 142 |
| | 23 | 2 | 53 | | 83 | | 143 |
| | 24 | 3 | 54 | | 84 | | 144 |
| | 25 | 4 | 55 | | 85 | | 145 |
| | 26 | 5 | 56 | | 86 | | 146 |
| | 27 | 6 | 57 | | 87 | | 147 |
| | 28 | 7 | 58 | | 88 | | 148 |
| | 29 | 8 | 59 | | 89 | | 149 |
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| (Assistant Examiner) (Date) | | | | | Total Claims Allowed: | | | | |
| (Legal Instruments Examiner) (Date) | | | | | | | | | |
| (Primary Examiner) (Date) | | | | | O.G. Print Claim(s) | | O.G. Print Fig. | | |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant | | | | | | | | | | <input type="checkbox"/> CPA | | <input type="checkbox"/> T.D. | | <input type="checkbox"/> R.1.47 | |
|--|----------|-------|----------|-------|----------|-------|----------|-------|----------|------------------------------|----------|-------------------------------|----------|---------------------------------|----------|
| Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| | 211 | | 241 | | 24 | | 271 | | 301 | | 331 | | 361 | | 391 |
| | 212 | | 242 | | 25 | | 272 | | 45 | | 332 | | 362 | | 392 |
| | 213 | | 243 | | 26 | | 273 | | 46 | | 333 | | 363 | | 393 |
| | 214 | | 244 | | 27 | | 274 | | 47 | | 334 | | 364 | | 394 |
| | 215 | | 245 | | | | 275 | | 48 | | 335 | | 365 | | 395 |
| | 216 | | 246 | | | | 276 | | 49 | | 336 | | 366 | | 396 |
| | 217 | | 247 | | 28 | | 277 | | 50 | | 337 | | 367 | | 397 |
| | 218 | | 248 | | 29 | | 278 | | | | 338 | | 368 | | 398 |
| | 219 | | 249 | | | | 279 | | 51 | | 339 | | 369 | | 399 |
| | 220 | | 250 | | | | 280 | | 52 | | 340 | | 370 | | 400 |
| | 221 | | 251 | | | | 281 | | 53 | | 341 | | 371 | | 401 |
| | 222 | | 252 | | 30 | | 282 | | 54 | | 342 | | 372 | | 402 |
| | 223 | | 253 | | 31 | | 283 | | 55 | | 343 | | 373 | | 403 |
| | 224 | | 254 | | 32 | | 284 | | 56 | | 344 | | 374 | | 404 |
| | 225 | | 255 | | 33 | | 285 | | 57 | | 345 | | 375 | | 405 |
| | 226 | | 256 | | 34 | | 286 | | 58 | | 346 | | 376 | | 406 |
| | 227 | | 257 | | 35 | | 287 | | | | 347 | | 377 | | 407 |
| | 228 | | 258 | | 36 | | 288 | | | | 348 | | 378 | | 408 |
| | 229 | | 259 | | 37 | | 289 | | | | 349 | | 379 | | 409 |
| | 230 | | 260 | | 38 | | 290 | | | | 350 | | 380 | | 410 |
| | 231 | | 261 | | 39 | | 291 | | 59 | | 351 | | 381 | | 411 |
| | 232 | | 262 | | 40 | | 292 | | 60 | | 352 | | 382 | | 412 |
| | 233 | 18 | 263 | | 41 | | 293 | | 61 | | 353 | | 383 | | 413 |
| | 234 | 19 | 264 | | 42 | | 294 | | 62 | | 354 | | 384 | | 414 |
| | 235 | 20 | 265 | | | | 295 | | | | 355 | | 385 | | 415 |
| | 236 | 21 | 266 | | | | 296 | | | | 356 | | 386 | | 416 |
| | 237 | | 267 | | 43 | | 297 | | | | 357 | | 387 | | 417 |
| | 238 | | 268 | | | | 298 | | | | 358 | | 388 | | 418 |
| | 239 | 22 | 269 | | 44 | | 299 | | | | 359 | | 389 | | 419 |
| | 240 | 23 | 270 | | | | 300 | | | | 360 | | 390 | | 420 |